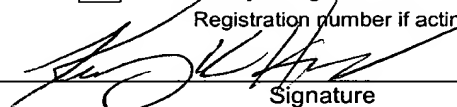
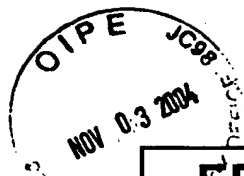




163*
AA
JH

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (fees effective on or after October 1, 2004)		Docket Number (Optional) PZ007P2	
Application Number 09/933,767-Conf. #7025		Filed August 22, 2001	
For 207 Human Secreted Proteins			
Art Unit 1634		Examiner B. L. Sisson	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	<u>Fee</u>	<u>Small Entity Fee</u>	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110.00	\$55.00	\$ 110.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$430.00	\$215.00	\$
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$980.00	\$490.00	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1,530.00	\$765.00	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2,080.00	\$1,040.00	\$
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>08-3425</u> . I have enclosed a duplicate copy of this sheet.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>40,302</u>			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____			
 Signature		November 3, 2004 Date	
<u>Kenley K. Hoover</u> Typed or printed name		<u>(301) 610-5771</u> Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of <u>1</u> forms are submitted.			

11/04/2004 HGUTENA1 00000018 083425 09933767
01 FC:1251 110.00 DA



*** Please note request to charge additional fees during the pendency of the application.

<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2005</h2> <p style="margin: 0; font-size: small;">Effective 10/01/2004. Patent fees are subject to annual revision.</p>		Complete if Known																																																																																																																																																																																																																																																																																												
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1807	50	1807	50	Processing fee under 37 CFR 1.17(q)																																																																																																																																																																																																																																																																																										
1806	180	1806	180	Submission of Information Disclosure Stmt																																																																																																																																																																																																																																																																																										
8021	40	8021	40	Recording each patent assignment per property (times number of properties)																																																																																																																																																																																																																																																																																										
1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																																																																																																																																																																																																																										
1810	790	2810	395	For each additional invention to be examined (37CFR 1.129(b))																																																																																																																																																																																																																																																																																										
1801	790	2801	395	Request for Continued Examination (RCE)																																																																																																																																																																																																																																																																																										
1802	900	1802	900	Request for expedited examination of a design application																																																																																																																																																																																																																																																																																										
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<div style="display: flex; justify-content: space-between;"><div>SUBMITTED BY</div><div>(Complete if applicable)</div></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"><div>Name (Print/Type) Kenley K. Hoover</div><div>Registration No. (Attorney/Agent) 40,302</div><div>Telephone (301) 610-5771</div></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"><div>Signature </div><div>Date November 3, 2004</div></div>																																																																																																																																																																																																																																																																																														